# F14000001338

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	of Status				
Special Instructions to Filing Officer:						
- <del>W4-</del>	<del>(1667</del>					

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#### **COVER LETTER**

	Filing Section				
	Midland	d States E	Bank		
SUBJECT:				- must include suffix	
Dear Sir or M	Iadam:				
"Certificate of	of Existence,"		of Good Star	iding" and check are su	act Business in Florida," bmitted to register the
Please return	all correspond	dence concernir	g this matter	to the following:	
Daphne	McCorr	nack			
			Name of	Person	
Midland	States	Bank			
			Firm/Com	pany	
1201 N	etwork C	entre Dri	ve		
Effingha	am IL 62	401	Addro	ess	
			City/State a	nd Zip code	
dmccorn		dlandsb.c			
	]	E-mail address:	(to be used t	or future annual report	notification)
For further in	formation cor	cerning this ma	itter, please o	eall:	
Douglas	s Tucker		217	342-7566 Code & Daytime Telepl	
Nam	ne of Person		Area	Code & Daytime Telep	hone Number
New Divis Clifto 2661 Talla	Filing Section sion of Corpor on Building Executive Ce hassee, FL 32	ations nter Circle		MAILING A New Filing S Division of C P.O. Box 632 Tallahassee,	ection Corporations 27
<b>\$70.00</b> Fi		\$78.75 Filing Certificate of	Fee &	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

February 10, 2014

DAPHNE MCCORMACK 1201 NETWORK CENTRE DRIVE EFFINGHAM, IL 62401

SUBJECT: MIDLAND STATES BANCORP, INC

Ref. Number: W14000008667

We have received your document for MIDLAND STATES BANCORP, INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Written approval and clearance of the words BANK, BANC, BANCO, BANQUE, BANKER, BANKING, TRUST COMPANY, . SAVINGS AND LOAN ASSOCIATION, SAVINGS BANK or CREDIT UNION, or words of similar import in any context or any manner must be obtained from the Office of Financial Regulation, pursuant to section 655.922(2a), Florida Statutes.

Enclosed is a "Corporate Name Approval Request" form to be completed and sent to the address indicated on the form. If the proposed name is approved by the Office of Financial Institutions, resubmit the document and the approval letter to the Division of Corporations for filing. The Office of Financial Institutions' phone number is 850-410-9800.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 214A00003005



## FLORIDA OFFICE OF FINANCIAL REGULATION

DREW J. BREAKSPEAR COMMISSIONER

March 6, 2014

Mr. Douglas Tucker 1 1201 Network Centre Drive Effingham, IL 62401

Re: Midland States Bancorp, Inc.

Dear Mr. Tucker:

Reference is made to your recent letter requesting approval of the above referenced name, which is the bank holding company for Midland States Bank, a state member bank located in Effingham, Illinois.

As Section 655.922, Florida Statutes, exempts a financial institution, holding company or its subsidiaries from the prohibition of using the word "bank," "banco," "banque," "banker," "banking," "trust company," "savings and loan association," "savings bank," or "credit union," or words of similar import, in any context or in any manner in its corporate name.

Therefore, this Office will not object to the use of the above referenced name being registered to transact business in the state of Florida. However, this correspondence is not intended to grant the authority to act in any licensed capacity until all licensing requirements have been met within this state.

Sincerely,

Robert D. Hayes

Director

RDH:bk

cc: Brenda Tadlock, Chief, Bureau of Commercial Recordings, Division of Corporations, Department of State

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SCORPAGE TO ROISEAND STANDARD TO A STANDARD

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(Enter name of c	States Bank Inc orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"		_
	States Bank		·		
(If name unavail	able in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business in	Florida)	-
<sub>2.</sub> Illinois		3			
(State or country under the law of which it is incorporated)		_ 3.	(FEI number, if applicable)		
4. 10/25/20	10	5	Perpetual		
··	of incorporation)	٦.	(Duration: Year corp. will cease to exist or "per	petual")	<b></b>
6. 03/01/20	13				
	(Date first transacted busine (SEE SECTIONS 607.1501 & 60	7.15	Florida, if prior to registration) 602, F.S., to determine penalty liability)		<del></del>
<sub>7.</sub> 1201 Netv	vork Centre Drive Effing	na	m IL 62401		<b>_</b>
	(Principal office		· ·		
1201 Netw	ork Centre Drive Effingh	am	ı IL 62401	<b>~</b>	ت.
	(Current mailing	addı	ress)		
	er settlement trusts from			MAR 2	
(Purpose(s)	of corporation authorized in home state of	rco	untry to be carried out in state of Florida)	<del>-</del>	
9. Name and stree	t address of Florida registered agent:	(P.C	D. Box NOT acceptable)	H.	12. 3. Er
Name:	NRAI Services, Inc.	<u>-</u> -		: 37	
Office Address:	1200 South Pine Islan	d F	<u>Rd</u>		
	Plantation		, Florida 33324		
	(City)		(Zip code)		
designated in this further agree to co	ed as registered agent and to accept s application, I hereby accept the appo	intn es r	ce of process for the above stated corporation tent as registered agent and agree to act in the lative to the proper and complete performations from the proper and complete performations.	this cape	acity. 1

(Registered agent's signature)

Ву:

Rachel Glasheen, VP & Assistant Secretary

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

NRAI Services, Inc.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: John Schultz Address: 1201 Network Centre Drive Effingham IL 62401 Vice Chairman: Leon Holschbach Address: 1201 Network Centre Drive Effingham IL 62401 Robert Schultz Director: Address: 1201 Network Centre Drive Effingham IL 62401 Q. Anthony Siemer Director: 1201 Network Centre Drive Address: Effingham IL 62401 **B. OFFICERS** President: Leon Holschbach 1201 Network Centre Drive Effingham II 62401 Vice President: Jeffrey Ludwig Address: 1201 Network Centre Drive Effingham II 62401 Secretary: Douglas Tucker 1201 Network Centre Drive Michael Karibian Treasurer: 1201 Network Centre Drive Effingham II 62401 Address: NOTE: If necessary you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. (Typed or printed name and capacity of person signing application)

ON SION OF CORPORATE

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#### **DIRECTORS**

Jeffrey Smith 1201 Network Centre Drive Effingham IL 62401

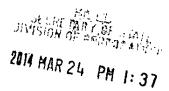
Richard Ramos 1201 Network Centre Drive Effingham IL 62401

Thomas Shaw 1201 Network Centre Drive Effingham IL 62401

Jerry McDaniel 1201 Network Centre Drive Effingham IL 62401

Dwight Miller 1201 Network Centre Drive Effingham IL 62401





## State of Hlinois Department of Financial and Professional Regulation Division of Banking

@ate: March 12, 2014

### Certificate

I, MARC A. EDWARDS, do hereby certify that, according to the records maintained by the Illinois Department of Financial and Professional Regulation, Division of Banking, MIDLAND STATES BANK, EFFINGHAM COUNTY, EFFINGHAM, ILLINOIS, has held and continues to hold authority to do a general banking business as provided by the Illinois Banking Act and as permitted by its charter.



IN TESTIMONY WHEREOF, I hereby subscribe my name.

DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION of the State of Illinois;
MANUEL FLORES, ACTING SECRETARY

DIVISION OF BANKING

Marc A. Edwards, Manager

Bank and Thrift Supervision - Springfield